PROTOCOLS, MEDICATIONS AND DEVICES COMMITTEE MINUTES September 15, 2005

MEMBERS PRESENT

MEMBERS ABSENT

John Gallagher IIITerence MasonPatricia EllisMarc HolyfieldJanine AndersonTerry ShineCharles FinchSue Kern

TELECONFERENCE

Steven Curry Rob Jarvis

I. CALL TO ORDER

John Gallagher called the meeting to order at 1:10 p.m.

II. DISCUSS/AMEND and APPROVE Minutes

A motion was made by Terence Mason, seconded by Terry Shine to approve the minutes of May 12, 2005 with one correction to add the date. **Motion carried**.

III. OLD BUSINESS

A. Discussion and Action on Adopting Drug Profiles as Guidance Documents for Vasopressin and Vaponefrin.

Dr. Gallagher distributed a Vasopressin drug profile.

A motion was made by Terence Mason and seconded by Terry Shine to adopt the drug profile with no changes. **Motion carried**.

A motion was made by Terry Shine and seconded by Terence Mason to table the Vaponefrin drug profile to the next meeting. **Motion carried**.

Item: Vaponefrin Drug Profile

Follow Up: Next PMD Committee Meeting

When: November 17, 2005 Who: Dr. Gallagher

B. Discussion and Action on Revised Pediatric Treatment and Triage Protocols

A motion was made by Janine Anderson, seconded by Terence Mason to accept the Pediatric Treatment and Triage Protocols with one correction on page 8 under BLS box number 4 delete "Discard wet towels." **Motion carried**.

C. Discussion and Action on Proposed Rulemaking and Guidance Documents for EMT-B use of an Esophageal Tracheal Double Lumen Airway Device (Combitube)

A motion was made by Terry Shine, seconded by Terence Mason to accept Combitube for the scope of practice for EMT-Basics and to approve the draft rule and guidance document presented. **Motion carried**.

IV. NEW BUSINESS

A. Discussion and Action on Continuous Positive Airway Pressure (CPAP) Device

Two salesmen from different companies reported about their CPAP product.

Mark Sporacio, Regional Sales Manager from Emergent Respiratory Products reported that CPAP has been very effective for the treatment of congestive heart failure (CHF), pulmonary edema, near drowning and COPD patients:

- reducing the need to intubate in up to 85% of the cases
- reducing length of stay in hospital by 50% or more
- very simple to use and easy to apply
- easy to discontinue
- fits in with the current protocols in the delivery of oxygen

Bryon Moore, EMS Market Development Manager stated that his company Respironics believes in non-invasive ventilation.

- easy to apply and remove
- tremendous benefits for CHF by shifting fluid out of the lungs
- tremendous benefits to the heart
- reduce preload and after load
- increase ejection fraction
- benefits are on the hospital side

Janine Anderson asked how many states are using CPAP in the prehospital arena and at what level.

Dr. Curry asked about trials that have been done that show that CPAP changes outcome, prevents intubation without harm in the prehospital setting and patient outcomes.

A motion was made by Dr. Curry, seconded by Terence Mason to table this item to the next PMD meeting to allow committee members to review studies conducted and the data collected. **Motion carried**.

Item: Discussion and Action on Continuous Positive Airway Pressure

(CPAP) Device

Follow Up: Next PMD Committee Meeting

When: November 17, 2005 Who: Dr. Gallagher

B. Discussion and Action on New Intraosseous Infusion Device

John Misiweicz, Clinical Specialist with Vidacare gave a Powerpoint presentation on EZ-IO:

- the needle is designed to drill into the bone
- allows the placement by hand within 30 seconds
- has been approved for placement in the tibia
- this device is a non-impact driven system
- battery operated driver

A motion was made by Terence Mason and seconded by Janine Anderson to approve this device

and forward it to Medical Direction Commission for approval. Motion carried.

Item: Discussion and Action on New Intraosseous Infusion Device

Follow Up: Next Medical Direction Commission Meeting When: Tentatively Scheduled for October 21, 2005

Who: Dr. Gallagher

C. Discussion and Action on Verapamil

Janine Anderson informed the committee when we added Diltiazem there was discussion at that time whether or not we still needed Verapamil in the drug box as well. Diltiazem is listed as optional and Verapamil is listed as a must have. She asked that the past minutes be checked when Dr. Sucher was Medical Director. Dr. Gallagher stated that we should not have both drugs in the drug box.

A motion was made by Janine Anderson and seconded by Terence Mason that either in the present drug box revision or the next drug box revision we make it mandatory to carry one or the other of the calcium channel blockers (Diltiazem or Verapamil) or if they want to carry both make that an option. **Motion carried**.

D. Discussion and Action on Pneumatic Anti-Shock Garment (PASG)

Janine Anderson stated that PASG is not on the minimum equipment and supplies requirements for ground ambulance vehicles per rule R9-25-1003, from September 30, 2004. It was confirmed that this rule reflects the current ambulance equipment requirements.

Janine Anderson stated that they are looking at pelvic binders on the treatment guidelines for unstable pelvic fractures to replace the PASG. Dr. Gallagher stated that this was not a change in the scope of practice in the treatment guidelines and the pelvic binder is an acceptable alternative for that use.

A motion was made by Janine Anderson, seconded by Terence Mason to approve pelvic binders as an approved splinting device for all levels of EMS providers. **Motion carried**.

Staff was asked to verify with Dr. Bobrow to ensure use of pelvic binders instead of PASG's is not contrary to rule or practice.

An amendment was made by Dr. Gallagher to add "pelvic binders as an alternative PASG" to the motion. Janine Anderson and Terence Mason accepted the amendment to the motion.

V. CALL TO THE PUBLIC

No one came forward.

VI. SUMMARY OF CURRENT EVENTS

None

VII. ANNOUNCEMENT OF NEXT MEETING – November 17, 2005

VIII. ADJOURNMENT

John Gallagher adjourned the meeting at 2:00 p.m.

Minutes prepared by: Donna Meyer

Approved by Committee on February 16, 2006